

B1 (Official Form 1)(04/13)

United States Bankruptcy Court Northern District of Illinois		Voluntary Petition										
Name of Debtor (if individual, enter Last, First, Middle): Marchlewicz, Gary E.		Name of Joint Debtor (Spouse) (Last, First, Middle):										
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): FDBA Home Best Exteriors; AKA Greg Marchlewicz		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):										
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all) xxx-xx-5210		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all)										
Street Address of Debtor (No. and Street, City, and State): 908-29th Street Rockford, IL <div style="text-align: right; margin-top: 5px;">ZIP Code 61108</div>		Street Address of Joint Debtor (No. and Street, City, and State): <div style="text-align: right; margin-top: 5px;">ZIP Code</div>										
County of Residence or of the Principal Place of Business: Winnebago		County of Residence or of the Principal Place of Business:										
Mailing Address of Debtor (if different from street address): <div style="text-align: right; margin-top: 5px;">ZIP Code</div>		Mailing Address of Joint Debtor (if different from street address): <div style="text-align: right; margin-top: 5px;">ZIP Code</div>										
Location of Principal Assets of Business Debtor (if different from street address above):												
Type of Debtor (Form of Organization) (Check one box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Nature of Business (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding										
Chapter 15 Debtors Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending:	Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	Nature of Debts (Check one box) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.										
Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (amount subject to adjustment on 4/01/16 and every three years thereafter). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).										
Statistical/Administrative Information <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY										
Estimated Number of Creditors <table style="width: 100%; text-align: center;"> <tr> <td><input type="checkbox"/> 1-49</td> <td><input type="checkbox"/> 50-99</td> <td><input type="checkbox"/> 100-199</td> <td><input checked="" type="checkbox"/> 200-999</td> <td><input type="checkbox"/> 1,000-5,000</td> <td><input type="checkbox"/> 5,001-10,000</td> <td><input type="checkbox"/> 10,001-25,000</td> <td><input type="checkbox"/> 25,001-50,000</td> <td><input type="checkbox"/> 50,001-100,000</td> <td><input type="checkbox"/> OVER 100,000</td> </tr> </table>			<input type="checkbox"/> 1-49	<input type="checkbox"/> 50-99	<input type="checkbox"/> 100-199	<input checked="" type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000	<input type="checkbox"/> 50,001-100,000	<input type="checkbox"/> OVER 100,000
<input type="checkbox"/> 1-49	<input type="checkbox"/> 50-99		<input type="checkbox"/> 100-199	<input checked="" type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000	<input type="checkbox"/> 50,001-100,000	<input type="checkbox"/> OVER 100,000		
Estimated Assets <table style="width: 100%; text-align: center;"> <tr> <td><input checked="" type="checkbox"/> \$0 to \$50,000</td> <td><input type="checkbox"/> \$50,001 to \$100,000</td> <td><input type="checkbox"/> \$100,001 to \$500,000</td> <td><input type="checkbox"/> \$500,001 to \$1 million</td> <td><input type="checkbox"/> \$1,000,001 to \$10 million</td> <td><input type="checkbox"/> \$10,000,001 to \$50 million</td> <td><input type="checkbox"/> \$50,000,001 to \$100 million</td> <td><input type="checkbox"/> \$100,000,001 to \$500 million</td> <td><input type="checkbox"/> \$500,000,001 to \$1 billion</td> <td><input type="checkbox"/> More than \$1 billion</td> </tr> </table>			<input checked="" type="checkbox"/> \$0 to \$50,000	<input type="checkbox"/> \$50,001 to \$100,000	<input type="checkbox"/> \$100,001 to \$500,000	<input type="checkbox"/> \$500,001 to \$1 million	<input type="checkbox"/> \$1,000,001 to \$10 million	<input type="checkbox"/> \$10,000,001 to \$50 million	<input type="checkbox"/> \$50,000,001 to \$100 million	<input type="checkbox"/> \$100,000,001 to \$500 million	<input type="checkbox"/> \$500,000,001 to \$1 billion	<input type="checkbox"/> More than \$1 billion
<input checked="" type="checkbox"/> \$0 to \$50,000	<input type="checkbox"/> \$50,001 to \$100,000	<input type="checkbox"/> \$100,001 to \$500,000	<input type="checkbox"/> \$500,001 to \$1 million	<input type="checkbox"/> \$1,000,001 to \$10 million	<input type="checkbox"/> \$10,000,001 to \$50 million	<input type="checkbox"/> \$50,000,001 to \$100 million	<input type="checkbox"/> \$100,000,001 to \$500 million	<input type="checkbox"/> \$500,000,001 to \$1 billion	<input type="checkbox"/> More than \$1 billion			
Estimated Liabilities <table style="width: 100%; text-align: center;"> <tr> <td><input type="checkbox"/> \$0 to \$50,000</td> <td><input type="checkbox"/> \$50,001 to \$100,000</td> <td><input checked="" type="checkbox"/> \$100,001 to \$500,000</td> <td><input type="checkbox"/> \$500,001 to \$1 million</td> <td><input type="checkbox"/> \$1,000,001 to \$10 million</td> <td><input type="checkbox"/> \$10,000,001 to \$50 million</td> <td><input type="checkbox"/> \$50,000,001 to \$100 million</td> <td><input type="checkbox"/> \$100,000,001 to \$500 million</td> <td><input type="checkbox"/> \$500,000,001 to \$1 billion</td> <td><input type="checkbox"/> More than \$1 billion</td> </tr> </table>		<input type="checkbox"/> \$0 to \$50,000	<input type="checkbox"/> \$50,001 to \$100,000	<input checked="" type="checkbox"/> \$100,001 to \$500,000	<input type="checkbox"/> \$500,001 to \$1 million	<input type="checkbox"/> \$1,000,001 to \$10 million	<input type="checkbox"/> \$10,000,001 to \$50 million	<input type="checkbox"/> \$50,000,001 to \$100 million	<input type="checkbox"/> \$100,000,001 to \$500 million	<input type="checkbox"/> \$500,000,001 to \$1 billion	<input type="checkbox"/> More than \$1 billion	
<input type="checkbox"/> \$0 to \$50,000	<input type="checkbox"/> \$50,001 to \$100,000	<input checked="" type="checkbox"/> \$100,001 to \$500,000	<input type="checkbox"/> \$500,001 to \$1 million	<input type="checkbox"/> \$1,000,001 to \$10 million	<input type="checkbox"/> \$10,000,001 to \$50 million	<input type="checkbox"/> \$50,000,001 to \$100 million	<input type="checkbox"/> \$100,000,001 to \$500 million	<input type="checkbox"/> \$500,000,001 to \$1 billion	<input type="checkbox"/> More than \$1 billion			

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Marchlewicz, Gary E.

All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)

Location

Where Filed: - None -

Case Number:

Date Filed:

Location

Where Filed:

Case Number:

Date Filed:

Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet)

Name of Debtor:

- None -

Case Number:

Date Filed:

District:

Relationship:

Judge:

Exhibit A

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)

☐ Exhibit A is attached and made a part of this petition.

Exhibit B

(To be completed if debtor is an individual whose debts are primarily consumer debts.)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).

X /s/ Dennis L Leahy

Signature of Attorney for Debtor(s)

Dennis L Leahy

July 31, 2015

(Date)

Exhibit C

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made a part of this petition.

☒ No.

Exhibit D

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

☒ Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.

Information Regarding the Debtor - Venue

(Check any applicable box)

- ☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.
- ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.
- ☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

Certification by a Debtor Who Resides as a Tenant of Residential Property

(Check all applicable boxes)

- ☐ Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

(Name of landlord that obtained judgment)

(Address of landlord)

- ☐ Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
- ☐ Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.
- ☐ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):
Marchlewicz, Gary E.

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.
[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.
[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Gary E. Marchlewicz
Signature of Debtor Gary E. Marchlewicz

X _____
Signature of Joint Debtor

Telephone Number (If not represented by attorney)

July 31, 2015
Date

Signature of Attorney*

X /s/ Dennis L Leahy
Signature of Attorney for Debtor(s)

Dennis L Leahy 1599046
Printed Name of Attorney for Debtor(s)

Dennis L Leahy
Firm Name
One Court Place Suite 203
Rockford, IL 61101

Address

815 964-9600 Fax: 815 964-9620
Telephone Number

July 31, 2015
Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X _____
Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X _____
Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

X _____
Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court
Northern District of Illinois

In re **Gary E. Marchlewicz**

Debtor(s)

Case No.

Chapter

7

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* _____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Gary E. Marchlewicz
Gary E. Marchlewicz

Date: July 31, 2015

United States Bankruptcy Court
Northern District of Illinois

In re Gary E. Marchlewicz,
Debtor

Case No. _____

Chapter 7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	3	3,400.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		5,500.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	42		114,645.39	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			2,081.00
J - Current Expenditures of Individual Debtor(s)	Yes	2			2,015.00
Total Number of Sheets of ALL Schedules		56			
Total Assets			3,400.00		
Total Liabilities				120,145.39	

United States Bankruptcy Court
Northern District of Illinois

In re Gary E. Marchlewicz,
Debtor

Case No. _____

Chapter 7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	5,500.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	3,023.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	8,523.00

State the following:

Average Income (from Schedule I, Line 12)	2,081.00
Average Expenses (from Schedule J, Line 22)	2,015.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	2,203.00

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		114,645.39
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		114,645.39

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
--------------------------------------	---	------------------------------------	--	-------------------------

None

Sub-Total > 0.00 (Total of this page)

Total > 0.00

(Report also on Summary of Schedules)

0 continuation sheets attached to the Schedule of Real Property

B6B (Official Form 6B) (12/07)

In re Gary E. Marchlewicz, Case No. _____
Debtor

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property."

If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1. Cash on hand	X			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	X			
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		computer	-	400.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		clothing	-	300.00
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			

Sub-Total > 700.00
(Total of this page)

2 continuation sheets attached to the Schedule of Personal Property

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.		worker's compensation claim	-	Unknown

Sub-Total > 0.00
(Total of this page)

Sheet 1 of 2 continuation sheets attached to the Schedule of Personal Property

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		1999 Ford Expedition (128,000 miles)	-	2,000.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.		tools	-	700.00

Sub-Total > 2,700.00
(Total of this page)
Total > 3,400.00

(Report also on Summary of Schedules)

Sheet 2 of 2 continuation sheets attached to the Schedule of Personal Property

B6C (Official Form 6C) (4/13)

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

☐ 11 U.S.C. §522(b)(2)

☒ 11 U.S.C. §522(b)(3)

☐ Check if debtor claims a homestead exemption that exceeds

\$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
<u>Household Goods and Furnishings</u>			
computer	735 ILCS 5/12-1001(b)	400.00	400.00
<u>Wearing Apparel</u>			
clothing	735 ILCS 5/12-1001(a)	300.00	300.00
<u>Other Contingent and Unliquidated Claims of Every Nature</u>			
worker's compensation claim	820 ILCS 305/21	100%	Unknown
<u>Automobiles, Trucks, Trailers, and Other Vehicles</u>			
1999 Ford Expedition (128,000 miles)	735 ILCS 5/12-1001(c)	2,000.00	2,000.00
<u>Other Personal Property of Any Kind Not Already Listed</u>			
tools	735 ILCS 5/12-1001(b)	700.00	700.00

Total: 3,400.00 3,400.00

0 continuation sheets attached to Schedule of Property Claimed as Exempt

B6D (Official Form 6D) (12/07)

In re Gary E. Marchlewicz, Debtor

Case No. _____

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D W I F E J O I N T C O M M U N I T Y	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.								
			Value \$					
Account No.								
			Value \$					
Account No.								
			Value \$					
Account No.								
			Value \$					
Subtotal (Total of this page)								
Total (Report on Summary of Schedules)							0.00	0.00

0 continuation sheets attached

In re Gary E. Marchlewicz

Debtor

Case No. _____

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☐ **Domestic support obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☒ **Taxes and certain other debts owed to governmental units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to maintain the capital of an insured depository institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for death or personal injury while debtor was intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6E (Official Form 6E) (4/13) - Cont.

In re Gary E. Marchlewicz,
Debtor

Case No. _____

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
								AMOUNT ENTITLED TO PRIORITY
Account No.								
Illinois Department of Revenue Bankruptcy Section P.O. Box 64338 Chicago, IL 60664	-						5,500.00	Unknown
Account No.			notice only					
Illinois Department of Revenue Linebarger Goggan Blair & Sampson LLP PO Box 06140 Chicago, IL 60606-0140	-						0.00	0.00
Account No.			notice only					
Illinois Department of Revenue Harvard Collection Services 4839 N Elston Avenue Chicago, IL 60630-2534	-						0.00	0.00
Account No.								
Account No.								
Subtotal							5,500.00	0.00
(Total of this page)								
Total							5,500.00	0.00
(Report on Summary of Schedules)								

Sheet 1 of 1 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

Total
(Report on Summary of Schedules)

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R H U S B A N D W I F E J O I N T C O M M U N I T Y	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxx1684 21st Century Insurance P.O. Box 15510 Wilmington, DE 19886-9252	-	insurance premiums				263.00
Account No. Advanced Disposal 8538 Hwy 251 S Davis Junction, IL 61020	-	utility				106.00
Account No. All Kids and Family Care P.O. Box 19121 Springfield, IL 62794-9121	-	insurance premium				55.00
Account No. xxx6460 Amcore/BMO Harris Bank 501-7th Street Rockford, IL 61104	-	bank fees				88.00
Subtotal (Total of this page)						512.00

41 continuation sheets attached

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxx4981		bank fees				87.00
Associated Bank Corporate Security MS 7027 P.O. Box 19097 Green Bay, WI 54307-9097	-					
Account No. xxx7191		utility				124.00
AT&T Enhanced Recovery Corp Attn: Client Services 8014 Bayberry Rd Jacksonville, FL 32256	-					
Account No.		notice only				0.00
AT&T P.O. Box 769 Arlington, TX 76004	-					
Account No.		telephone service				183.00
AT&T Midwest Jefferson Capital Systems LLC 16 McLeland Rd Saint Cloud, MN 56303	-					
Account No.		notice only				0.00
AT&T Midwest / Jefferson Capital Systems First National Collection Bureau 610 Waltham Way Sparks, NV 89434	-					
Sheet no. <u>1</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						394.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		bank fees				
Blackhawk State Bank 400 Broad Street Beloit, WI 53512-9950	-					116.00
Account No.		notice only				
Blackhawk State Bank Transworld Systems Inc. 9525 Sweet Valley Dr. Cleveland, OH 44125	-					0.00
Account No.		notice only				
BSI Financial Services PO Box 517 314 S. Franklin St. Titusville, PA 16354	-					0.00
Account No. xxx8012		insurance premium				
California Casualty P.O. Box 39700 Colorado Springs, CO 80949-9700	-					53.00
Account No.		notice only				
California Casualty Joseph Mann & Creed 8948 Canyon Falls Blvd #200 Twinsburg, OH 44087	-					0.00
Sheet no. <u>2</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 169.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxx9097		medical				128.00
CBO CV CB Accts 124 SW Adams St #215 Peoria, IL 61602	-					
Account No. xxx8850		Opened 6/01/13				930.00
CCRT Properties Falls Collection Svc PO Box 668 Germantown, WI 53022	-	rent				
Account No.		medical				9.11
Centegra Health System 13707 W. Jackson St. Woodstock, IL 60098	-					
Account No. xxx5615		bank fees				313.00
Chase Bank / JP Morgan Chase Bank OH1-1272 340 S. Cleveland Ave #370 Westerville, OH 43081	-					
Account No. xxx1845		credit purchases				5,468.00
Citi Cards Citicorp Credit Svcs Attn: Centralized Bankruptcy PO Box 20507 Kansas City, MO 64195	-					
Sheet no. <u>3</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						6,848.11

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxx2416 Citi Cards Citicorp Credit Svices Attn: Centralized Bankruptcy Box 6000 The Lakes, NV 89163-6000	-	credit purchases				5,019.00
Account No. Citibank South Dakota NA Unifund 10625 Techwoods Circle Cincinnati, OH 45242	-	notice only				0.00
Account No. xxx2416 Citibank South Dakota NA Palisades Collection LLC Blitt and Gaines, PC 661 W Glenn Avenue Wheeling, IL 60090	-	judgment Winnebago County 10AR735				21,227.00
Account No. xxx2901 Citizens Fin Attn:Bankruptcy 6457 N 2nd St Loves Park, IL 61111	-	deficiency from repossession of vehicle				4,265.00
Account No. xxx13SCS City of Madison Ambulance Conv Credit Management Cont PO Box 1654 Green Bay, WI 54305	-	Opened 1/01/14 Last Active 5/05/14 medical				11.00
Sheet no. <u>4</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						30,522.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxx6842		Parking Tickets				
City of Rockford Parking Rockford Mercantile 2502 S Alpine Rd Rockford, IL 61108	-					100.00
Account No.		notice only				
City of Rockford Parking ABM 211B Elm Street Rockford, IL 61101	-					0.00
Account No. xxx6479		Opened 2/01/14				
Comcast Stellar Recovery Inc. 4500 Salisbury Rd #105 Jacksonville, FL 32216-8035	-	utility				129.00
Account No.		notice only				
Comcast Southwest Credit System 4120 International Parkway #100 Carrollton, TX 75007	-					130.00
Account No. xxx-0628						
Comcast 4450 Kishwaukee St. Rockford, IL 61109	-					130.00
Sheet no. <u>5</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						489.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz, Debtor Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		notice only				
Commonwealth Edison TCS Inc. / Torres Credit PO Box 189 Carlisle, PA 17013-0189	-					0.00
Account No.		notice only				
Commonwealth Edison CBE Group 1309 Technology Pkwy Cedar Falls, IA 50613	-					0.00
Account No.		utility				
Commonwealth Edison Attn: Bankruptcy Group 3 Lincoln Center Oakbrook Terrace, IL 60181	-					8,000.00
Account No.						
Commonwealth Edison Credit Collection Services Two Wells Ave, Dept 9136 Newton Center, MA 02459	-					316.00
Account No.		notice only				
Commonwealth Edison LJ Ross Associates P.O. Box 6099 Jackson, MI 49204-6099	-					0.00
Sheet no. <u>6</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						8,316.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		notice only				
Commonwealth Edison Contract Callers Inc. 501 Greene St., 3rd Floor #302 Augusta, GA 30901	-					0.00
Account No.		notice only				
Credit Control 9428 Baymeadows Rd #260 Jacksonville, FL 32256	-					0.00
Account No.		notice only				
Creditor's Protection Service 308 W. State St. #485 Rockford, IL 61101	-					0.00
Account No.		medical				
Crusader Clinic 1200 W. State St. Rockford, IL 61102	-					75.00
Account No.		notice only				
Crusader Clinic Rockford Mercantile Agency 2502 S. Alpine Rd Rockford, IL 61108	-					0.00
Sheet no. <u>7</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						75.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz, Debtor Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		medical				
Diamond Headache Clinic 2742 Momentum Place Chicago, IL 60689-0001	-					390.00
Account No.		notice only				
Diamond Headache Clinic Transworld Systems Inc. 9525 Sweet Valley Dr Cleveland, OH 44125	-					0.00
Account No.		notice only				
Diamond Headache Clinic Law Office of Joel Cardis 2006 Swede Rd #100 E. Norriton, PA 19401	-					0.00
Account No.		notice only				
Diamond Headache Clinic NCO Financial Systems 507 Prudential Rd Horsham, PA 19044	-					0.00
Account No.		notice only				
Discover Bank Blitt and Gaines PC 661 Glenn Ave Wheeling, IL 60090	-					0.00
Sheet no. <u>8</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						390.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxx1884		credit purchases				9,208.00
Discover Card P.O. Box 30395 Salt Lake City, UT 84130-0395	-					
Account No.		notice only				0.00
Discover Card AMO Recoveries 25221 Country Club Blvd #200 North Olmsted, OH 44070	-					
Account No.		notice only				0.00
Discover Card Discover Financial Services TSYS Total Debt Management P.O. Box 6700 Norcross, GA 30091-6700	-					
Account No.		notice only				0.00
Discover Card Encore Receivable Management 400 N Rogers Rd P.O. Box 3330 Olathe, KS 66063-3330	-					
Account No.		notice only				0.00
Discover Card 2500 Lake Cook Rd Deerfield, IL 60015	-					
Sheet no. <u>9</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						9,208.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		notice only				
DreamBuilder Investments LLC BP Law Group 8815 Research Dr. Irvine, CA 92618	-					0.00
Account No.		notice only				
DTA Solutions LLC PO Box 202166 Dallas, TX 75320-2166	-					0.00
Account No.		insurance premium				
Erie Insurance 100 Erie Ins. Place Erie, PA 16530	-					812.00
Account No.		notice only				
Erie Insurance Receivable Management Services 77 Hartland St. #401 P.O. Box 280431 East Hartford, CT 06128-0431	-					0.00
Account No.		notice only				
Erie Insurance Brennan & Clark 721 E.Madison #200 Villa Park, IL 60181	-					0.00
Sheet no. <u>10</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						812.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz, Debtor Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		notice only				
Fertility Centers of Illinois Certified Services Inc 1733 Washington St. #2 Waukegan, IL 60085	-					0.00
Account No.		medical				
Fertility Centers of Illinois 3703 West Lake Ave #310 Glenview, IL 60026-1266	-					Unknown
Account No.		notice only				
Fertility Centers of Illinois Certified Services Inc Attorney David J. Axelrod & Assoc 1448 Old Skokie Rd Highland Park, IL 60035	-					0.00
Account No. xxx9878		bank fees				
Fifth Third Bank Attn: Legal Rep Notice 1830 E Paris Ave Grand Rapids, MI 49546	-					458.00
Account No.		notice only				
Fifth Third Bank Allied Interstate P.O. Box 4000 Warrenton, VA 20188	-					0.00
Sheet no. <u>11</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						458.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz, Debtor Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		notice only				
Fifth Third Bank Allied Interstate P.O. Box 4000 Warrenton, VA 20188	-					0.00
Account No.		notice only				
Fifth Third Bank / Diverse Funding Assoc CAB Asset Management PO Box 20298 Towson, MD 21284-0298	-					0.00
Account No.		notice only				
Fifth Third Bank / Diverse Funding Assoc Apelles 3700 Corporate Drive #240 Columbus, OH 43231	-					0.00
Account No.		notice only				
Fifth Third Bank / Diverse Funding Assoc Halsted Financial Services P.O. Box 828 Skokie, IL 60076	-					0.00
Account No.		notice only				
First Capital LLC as assignee of Hudson & Keyse LLC /National City Bank The Shindler Law Firm 1990 E. Algonquin Rd #180 Schaumburg, IL 60173	-					0.00
Sheet no. <u>12</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						0.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxx6349						
First Energy Solutions 341 White Pond Drive #B2 Akron, OH 44320	-					26.00
Account No.		notice only				
First Energy Solutions Receivable Management Services 4836 Brecksville Rd P.O. Box 523 Richfield, OH 44286	-					0.00
Account No.		notice only				
First Franklin Loan Services 150 Allegheny Center Mall Locator # 24-040 Pittsburgh, PA 15212	-					0.00
Account No.		notice only				
FV-I Inc. in Trust for Morgan Stanley Mortgage Capital Holdings c/o Pierce & Assoc. 1 North Dearborn Chicago, IL 60602	-					0.00
Account No. xxx0856		insurance premium				
Geico Casualty Co One Geico Center Macon, GA 31296-0001	-					55.00
Sheet no. <u>13</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						81.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		notice only				0.00
Geico Casualty Co Credit Collection Services Two Wells Ave Newton Center, MA 02459	-					
Account No.		medical				111.00
Healthsource Rockford East 7445 E State St. Rockford, IL 61108	-					
Account No.		veterinary services				181.00
Hillcrest Animal Hospital 227 N Alpine Rd Rockford, IL 61107	-					
Account No.		notice only				0.00
Hillcrest Animal Hospital Rockford Mercantile Agency 2502 S Alpine Rd Rockford, IL 61108	-					
Account No. xxx9215		credit purchases				1,723.00
Home Depot Credit Services PO Box 689100 Des Moines, IA 50368	-					
Sheet no. <u>14</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						2,015.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		notice only				
Home Depot Credit Services Riverwalk Holdings Ltd Praxis Financial Solutions 7331 N. Lincoln Ave #8 Lincolnwood, IL 60712-1704	-					0.00
Account No.		notice only				
Home Depot Credit Services Riverwalk Holdings Ltd Northland Group P.O. Box 390846 Minneapolis, MN 55439	-					0.00
Account No.		notice only				
Home Depot Credit Services CitiCorp Credit Services Centralized Bankruptcy PO Box 20507 Kansas City, MO 64195	-					0.00
Account No.		notice only				
Home Depot Credit Services / Citibank Riverwalk Holdings Ltd Second Round, LP P.O. Box 41955 Austin, TX 78704-1955	-					0.00
Account No.		notice only				
Home Depot Credit Services / Citibank Riverwalk Holdings Ltd Vision Financial Group P.O. Box 900 Purchase, NY 10577-0900	-					0.00
Sheet no. <u>15</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						0.00
Subtotal (Total of this page)						0.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz, Debtor Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		notice only				
Home Depot Credit Services / Citibank Riverwalk Holdings Ltd Velocity Investments P.O. Box 788 Wall, NJ 07719	-					0.00
Account No.		notice only				
Home Depot Credit Services / Citibank Riverwalk Holdings Ltd Velocity Investments/Capital Mgmt Serv 698-1/2 S Ogden St. Buffalo, NY 14206-2317	-					0.00
Account No.		notice only				
Hudson & Keyse LLC as assignee of National City Bank Law Office of Keith S. Shindler 1040 S Milwaukee Ave Wheeling, IL 60090	-					0.00
Account No. xxx3153		Winnebago County judgment 07-SC-4218				
Hudson & Keyse LLC as assignee of National City Bank 382 Blackbrook Rd Painesville, OH 44077	-					6,235.00
Account No.		medical				
Ignacio U Omengan, MD Mutual Management 7177 Crimson Ridge Dr. #10 Rockford, IL 61107	-					106.00
Sheet no. <u>16</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						6,341.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		notice only				
Ignacio U Omengan, MD Attorney Terry Hoss P.O. Box 449 Cherry Valley, IL 61016	-					0.00
Account No. xxx0814		overpayment of benefits				
Illinois Dept of Employment Security Benefit Payment Control PO Box 4385 Chicago, IL 60680-4385	-					465.00
Account No.		medical				
Illinois Pathologist Services P.O. Box 9846 Peoria, IL 61612	-					348.00
Account No.		tolls				
Illinois Tollway Violation Administration Center 2700 Ogden Ave Downers Grove, IL 60515-1703	-					Unknown
Account No.						
Illinois Tollway Thomas Planera & Assoc 4440 Lincoln Hwy #301 Matteson, IL 60443	-					4,700.00
Sheet no. <u>17</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						5,513.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz, Debtor Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
Illinois Tollway Law Office of Keith S. Shindler 1990 E Algonquin Rd Schaumburg, IL 60173	-					792.00
Account No.						
Illinois Tollway NCO Financial Systems 600 Holiday Plaza Dr. #300 Matteson, IL 60443	-					213.00
Account No.		notice only				
Illinois Tollway Arnold Scott Harris 111 W. Jackson Blvd #600 Chicago, IL 60604-4135	-					0.00
Account No.		payroll overpayment				
JP Morgan Chase & Co. Attn: Legal Paper Serv Dept, 18th Floor 4 Chase Metrotech Brooklyn, NY 11425	-					863.00
Account No.		notice only				
JP Morgan Chase & Co. American Coradius International 2420 Sweet Home Rd #150 Amherst, NY 14228-2244	-					0.00
Sheet no. <u>18</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						1,868.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz, Debtor Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		notice only				
JP Morgan Chase Bank West Asset Management 2703 N Hwy 75 Sherman, TX 75090	-					0.00
Account No.		notice only				
JP Morgan Chase Bank First Source Advantage 205 Bryant Woods South Amherst, NY 14228	-					0.00
Account No.		notice only				
JP Morgan Chase Bank Integrity Solution Services P.O. Box 7230 Overland Park, KS 66207-0230	-					0.00
Account No.		notice only				
JP Morgan Chase Bank United Recovery Systems 5800 North Course Drive Houston, TX 77072	-					0.00
Account No.		notice only				
JP Morgan Chase Bank Convergent Outsourcing 800 SW 39th St. P.O. Box 9004 Renton, WA 98057	-					0.00
Sheet no. <u>19</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						0.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		notice only				
Land Home Financial Services PO Box 5010 Concord, CA 94524	-					0.00
Account No.		notice only				
Land Home Financial Services PO Box 25164 Santa Ana, CA 92799-5164	-					0.00
Account No.		notice only				
Land Home Financial Services 2042 Wooddale Dr. #160 Woodbury, MN 55125	-					0.00
Account No. xxx6009		insurance premium				
Liberty Mutual 7029 Rote Rd #105 Rockford, IL 61107	-					301.00
Account No.		notice only				
Liberty Mutual 477 S. 3rd St. #148 Geneva, IL 60134	-					0.00
Sheet no. <u>20</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						301.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		notice only				0.00
Liberty Mutual Credit Collection Services Two Wells Ave Newton Center, MA 02459	-					
Account No.		medical				40.00
Life Watch 2731 Paysphere Cir Chicago, IL 60674-0027	-					
Account No.		advertising				200.00
Liturgical Publications P.O. Box 510817 New Berlin, WI 53151-0817	-					
Account No.		notice only				0.00
Liturgical Publications 2875 S James Dr. New Berlin, WI 53151	-					
Account No.						257.00
McHenry Co Court Clerk Alliance One Receivables Management PO Box 2449 Gig Harbor, WA 98335-2449	-					
Sheet no. <u>21</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						497.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. McHenry County Circuit Court Arnold Scott Harris Attorneys at Law 111 W. Jackson Blvd #600 Chicago, IL 60604-4134	-					345.00
Account No. Miller Eye Center 2995 Eastrock Drive Rockford, IL 61109	-	medical				10.00
Account No. Miller Eye Center Tri State Adjustments Freeport 440 E Challenge St. Freeport, IL 61032	-	notice only				0.00
Account No. Mutual Management Attorney D Richard Haime 6500 N Second St. Loves Park, IL 61111	-	notice only				0.00
Account No. Mutual Management 7177 Crimson Ridge Dr. #10 Rockford, IL 61107	-	medical				Unknown
Sheet no. <u>22</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						355.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		notice only				
National City P.O. Box 856176 Louisville, KY 40285-6176	-					0.00
Account No.		notice only				
National City/PNC Bank Attn: Bankruptcy Dept PO Box 489909 Charlotte, NC 28269-5329	-					0.00
Account No.		medical				
Neurologic & Orthopedic Institute of Chi Friedman & Wexler 500 W Madison St #2910 Chicago, IL 60661-2587	-					678.00
Account No. xxx7609		utility				
Nicor Gas Attn: Bankruptcy Dept 1844 Ferry Rd Naperville, IL 60563	-					4,591.92
Account No.		notice only				
Nicor Gas P.O. Box 190 Aurora, IL 60507	-					0.00
Sheet no. <u>23</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						5,269.92

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz, Debtor Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		notice only				
Nicor Gas NCO Financial Systems 507 Prudential Road Horsham, PA 19044	-					0.00
Account No.		medical				
OSF Medical Group P.O. Box 91011 Chicago, IL 60680-8807	-					Unknown
Account No.		notice only				
OSF Medical Group OSF Healthcare P.O. Box 1806 Peoria, IL 61656-1806	-					0.00
Account No.		notice only				
OSF Medical Group Convergent Healthcare recoveries 124 SW Adams St. #215 Peoria, IL 61602	-					0.00
Account No.		notice only				
OSF Saint Anthony Medical Center PO Box 5065 Rockford, IL 61125	-					0.00
Sheet no. <u>24</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						0.00
Subtotal (Total of this page)						0.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.		notice only				
OSF St Anthony Medical Center Rockford Mercantile 2502 S Alpine Rd Rockford, IL 61108	-					0.00
Account No.		medical				
OSF St Anthony Medical Center 5666 E. State St. Rockford, IL 61108	-					Unknown
Account No. xxx2416						
Palisades Collection LLC Unifund CCR Partners 10625 Techwoods Circle Cincinnati, OH 45242	-					10,000.00
Account No.						
Paypal, Inc. Convergent Outsourcing 800 SW 39th St. P.O. Box 9004 Renton, WA 98057	-					120.32
Account No.		notice only				
Paypal, Inc. American Coradius International 2420 Sweet Home Rd #150 Amherst, NY 14228-2244	-					0.00
Sheet no. <u>25</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						10,120.32

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		notice only				
Paypal, Inc. IC System 444 Hwy 96 East PO Box 64378 Saint Paul, MN 55164-0378	-					0.00
Account No.		notice only				
Paypal, Inc. IC System 444 Hwy 96 East PO Box 64378 Saint Paul, MN 55164-0378	-					0.00
Account No.		notice only				
Paypal, Inc. 2211 N. 1st St. San Jose, CA 95131	-					0.00
Account No.		notice only				
Perry Tuneberg DDS Rockford Mercantile 2502 S Alpine Rd Rockford, IL 61108	-					0.00
Account No.		dental				
Perry Tuneberg DDS 4040 Morsay Drive Rockford, IL 61107	-					136.00
Sheet no. <u>26</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						136.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		medical				
Physicians Immediate Care P.O Box 2176, Dept 5389 Milwaukee, WI 53201-2176	-					139.00
Account No.		notice only				
Physicians Immediate Care Creditor's Protection Service P.O. Box 4115 Rockford, IL 61110	-					0.00
Account No.		medical				
Radiology Consultants of Rockford 39020 Eagle Way Chicago, IL 60678-1390	-					66.00
Account No.		notice only				
Radiology Consultants of Rockford ATG Credit PO Box 14895 Chicago, IL 60614-4895	-					0.00
Account No.		advertising				
RH Donnelley / DEX Attn: Customer Care 1615 Bluff City Hwy Bristol, TN 37620	-					1,722.00
Sheet no. <u>27</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						1,927.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz, Debtor Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		notice only				
RH Donnelley / DEX JSD Management/James Stevens & Daniels 1283 College Park Drive Dover, DE 19904	-					0.00
Account No.		notice only				
RH Donnelley / DEX PO Box 619009 DFW Airport, TX 75261-9009	-					0.00
Account No. xxx0013		10 Rock River Water Reclamation D				
Rock River Water Reclamation United Credit Service PO Box 740 Elkhorn, WI 53121	-					1,846.00
Account No.		utility				
Rock River Water Reclamation 3501 Kishwaukee St. Rockford, IL 61109	-					2,465.00
Account No.		notice only				
Rock River Water Reclamation United Credit Serv. 15 N. Lincoln St. P.O. Box 740 Elkhorn, WI 53121-0740	-					0.00
Sheet no. <u>28</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						4,311.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. Rockford Associated Clinical Pathologist PO Box 8768 Rockford, IL 61126-8768	-	medical				200.00
Account No. xxx349N1 Rockford Cardiovascular Acct Rcv Svc 5183 Harlem Rd Loves Park, IL 61111	-	medical				79.00
Account No. Rockford Cardiovascular PO Box 6003 Rockford, IL 61126-6003	-	notice only				0.00
Account No. xxx349N2 Rockford Gastroenterology 401 Roxbury Rd Rockford, IL 61107	-	medical				6,174.00
Account No. Rockford Gastroenterology Account Recovery Services PO Box 2526 Loves Park, IL 61132	-	notice only				0.00
<div> <div>Sheet no. <u>29</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims</div> <div>Subtotal (Total of this page)</div> </div>						6,453.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.					
Account No.		notice only				0.00	
Rockford Health Physicians Creditors Protection Serv 308 W State St. #485 Rockford, IL 61101	-						
Account No.		notice only				Unknown	
Rockford Health Physicians Pellettieri 991 Oak Creek Dr Lombard, IL 60148	-						
Account No.		medical				Unknown	
Rockford Health Physicians 2300 N Rockton Avenue Rockford, IL 61103	-						
Account No.		notice only				0.00	
Rockford Health Physicians MiraMed Revenue Group Dept 77304 PO Box 77000 Detroit, MI 48277-0304	-						
Account No.		notice only				0.00	
Rockford Health System/RMH Rockford Mercantile 2502 S Alpine Rd Rockford, IL 61108	-						
Sheet no. <u>30</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)	0.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. Rockford Health System/RMH 2400 N Rockton Avenue Rockford, IL 61103	-	medical				546.00
Account No. Rockford Mercantile Agency 2502 S Alpine Rd Rockford, IL 61108	-	medical				Unknown
Account No. Rockford Orthopedic Associates PO Box 5247 Rockford, IL 61125-0247	-	medical				231.00
Account No. Rockford Orthopedic Associates Creditors Protection Service 308 W State St. #485 Rockford, IL 61101	-	notice only				0.00
Account No. Rockford Radiology PO Box 5368 Rockford, IL 61125-0368	-	medical				Unknown
Sheet no. <u>31</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 777.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz, Debtor Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		notice only				
Rockford Radiology Rockford Mercantile Agency 2502 S Alpine Rd Rockford, IL 61108	-					0.00
Account No.		notice only				
Rockford Radiology PO Box 1790 Brookfield, WI 53008-1790	-					0.00
Account No.		subscription				
Rockford Register Star 99 E. State St. Rockford, IL 61104	-					18.04
Account No.		notice only				
Saxon PO Box 161489 Fort Worth, TX 76161-1489	-					0.00
Account No.		notice only				
Select Portfolio Servicing PO Box 65250 Salt Lake City, UT 84165-0250	-					0.00
Sheet no. <u>32</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						18.04

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.					
Account No. xxx5560		medical				100.00	
SMHC of Wisconsin St Marys PSKN&OBRWTR 404 Glenway St Madison, WI 53701	-						
Account No. xxx0203		Opened 6/01/04 Last Active 8/01/09				Unknown	
Specialized Loan Servi Attn: Bankruptcy 8742 Lucent Blvd. Suite 300 Highlands Ranch, CO 80129	-	notice only					
Account No. xxx1794		utility				425.00	
Sprint ER Solutions/Convergent Outsourcing PO Box 9004 Renton, WA 98057	-						
Account No.		cell phone				425.00	
Sprint Customer Service PO Box 8077 London, KY 40742	-						
Account No.		notice only				0.00	
Sprint Convergent Outsourcing Inc. 10750 Hammerly Blvd #200 Houston, TX 77043	-						
Sheet no. <u>33</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)	950.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. Sprint Correspondence Attn: Bankruptcy Dept PO Box 7949 Overland Park, KS 66207-0949	-	notice only				0.00
Account No. Swedish American Health System Creditors Protection Serv PO Box 4115 Rockford, IL 61101	-	medical				Unknown
Account No. Swedish American Hospital R&B Receivables Management 860 S Northpoint Blvd Waukegan, IL 60085	-	notice only				Unknown
Account No. Swedish American Hospital NCC / Commonwealth Finance 245 Main St. Scranton, PA 18519	-	medical				395.00
Account No. Swedish American Hospital 1401 E State St. Rockford, IL 61104	-	medical				1,180.00
Sheet no. <u>34</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						1,575.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz, Debtor Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		notice only				
Swedish American Hospital Attorney Dennis A. Brebner & Assoc 860 Northpoint Blvd Waukegan, IL 60085-8211	-					0.00
Account No.		notice only				
Swedish American Hospital Creditors Protection Service 308 W State St. #485 Rockford, IL 61101	-					0.00
Account No.		cell phone				
T Mobile P.O. Box 37380 Albuquerque, NM 87176-7380	-					480.00
Account No.		notice only				
T Mobile Midland Credit Management 8875 Aero Drive #200 San Diego, CA 92123	-					0.00
Account No.		notice only				
T Mobile Bankruptcy Team P.O. Box 7949 Overland Park, KS 66207-0949	-					0.00
Sheet no. <u>35</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						480.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. xxx1726						
Tiger Direct Simplexity P.O. Box 25084 Lehigh Valley, PA 18002	-					300.00
Account No.		notice only				
Tiger Direct 7795 W. Flagler St. #35 Miami, FL 33144	-					0.00
Account No.		notice only				
Tiger Direct / Simplexity NCO Financial Systems 507 Prudential Rd Horsham, PA 19044	-					0.00
Account No.		notice only				
Tower Hobbies Pro Com Services Attn: Bankruptcy PO Box 202 Springfield, IL 62705	-					0.00
Account No.		credit purchases				
Tower Hobbies P.O. Box 9078 Champaign, IL 61826-9078	-					732.00
Sheet no. <u>36</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						1,032.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		notice only				
Tower Hobbies Business Service Bureau P.O. Box 771 Champaign, IL 61824	-					0.00
Account No.		credit purchases				
UPS P.O. Box 7247-0244 Philadelphia, PA 19170-0001	-					146.00
Account No.		notice only				
UPS 4836 Brecksville Rd PO Box 539 Richfield, OH 44286-9619	-					0.00
Account No.		notice only				
UPS Receivable Management Services PO Box 523 Richfield, OH 44286	-					0.00
Account No.						
US Bank Bankruptcy Dept PO Box 5227 CN-OH-W15 Cincinnati, OH 45202-5227	-					947.00
Sheet no. <u>37</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						1,093.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		notice only				
US Bank / Albion Credit Services Varadi Hair & Checki 650 Poydras St. #1535 New Orleans, LA 70130	-					947.00
Account No.		student loans				
US Dept of Education Great Lakes Educational Loan Services P.O. Box 530229 Atlanta, GA 30353-0229	-					3,023.00
Account No.		medical				
UW Health Physicians University of Wisc Medical Foundation 7974 UW Health Court Middleton, WI 53562-5531	-					35.00
Account No.		utility				
Veolia Environmental Services 8538 Hwy 251 South Davis Junction, IL 61020	-					200.00
Account No.		utility				
Verizon Wireless Pinnacle Credit Service Attn: Bankruptcy PO Box 640 Hopkins, MN 55343	-					605.00
Sheet no. <u>38</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						4,810.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz, Debtor Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.		notice only				
Verizon Wireless 5175 Emerald Pkwy Dublin, OH 43017	-					0.00
Account No.		notice only				
Verizon Wireless VantageSourcing P.O. Box 6786 Dothan, AL 36302	-					0.00
Account No.		notice only				
Verizon Wireless Receivables Performance Management 20816-44th Ave W Lynnwood, WA 98036	-					0.00
Account No.		notice only				
Verizon Wireless United Collection Bureau 5620 Southwyck Blvd #206 Toledo, OH 43614	-					0.00
Account No.		notice only				
Verizon Wireless Enhanced Recovery Company 8014 Bayberry Rd Jacksonville, FL 32256-7412	-					0.00
Sheet no. <u>39</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						0.00
Subtotal (Total of this page)						0.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz, Debtor Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
		H W J C					DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.
Account No.		notice only				0.00	
Verizon Wireless First National Collection Bureau 610 Waltham Way Sparks, NV 89434	-						
Account No.		notice only				0.00	
Verizon Wireless Bankruptcy Administration 500 Technology Dr. #550 Weldon Springs, MO 63304	-						
Account No. xxx5655		parking				200.00	
Village of Algonquin ACS 2200 Harnish Dr Algonquin, IL 60102	-						
Account No. 359-334xxxxx						Unknown	
Wilmington Trust NA as Trustee under Greenwich Investors XL Pass- Through Trust Agreement dated March 1, 2012 559 San Ysidro Rd #1 Santa Barbara, CA 93108	-						
Account No. xxx9021						Unknown	
Wilmington Trust NA, etc Land Home Financial Serv 2042 Woodale Dr. #160 Woodbury, MN 55125	-						
Sheet no. <u>40</u> of <u>41</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)	200.00

B6F (Official Form 6F) (12/07) - Cont.

In re Gary E. Marchlewicz, Debtor Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxx1902						
Wilmington Trust NA, etc Land Home Financial Ser/Dreambuilder Inv c/o BP Law Group 8815 Research Dr. Irvine, CA 92618	-					Unknown
Account No.						
Wilmington Trust NA, etc Land Home Financial Serv 3330 Harbor Blvd, 3rd Floor Costa Mesa, CA 92626	-					Unknown
Account No.		advertising				
Yellow Book HIBU 6300 C Street SW Cedar Rapids, IA 52404	-					329.00
Account No.		notice only				
Yellow Book Clovis & Roche PO Box 1164 Metairie, LA 70004	-					0.00
Account No.						

Sheet no. 41 of 41 sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page)	329.00
Total (Report on Summary of Schedules)	114,645.39

In re Gary E. Marchlewicz

Case No. _____

Debtor

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code,
of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest.
State whether lease is for nonresidential real property.
State contract number of any government contract.

B6H (Official Form 6H) (12/07)

In re **Gary E. Marchlewicz**

Debtor(s)

Case No.

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight years immediately preceding the commencement of this case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Agnieszka (Angel) Marchlewicz Bacik 6231 S. Moody Chicago, IL 60638	Multiple creditors

Fill in this information to identify your case:

Debtor 1 Gary E. Marchlewicz

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number _____
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form B 6I

Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Occupation

Employer's name

Employer's address

How long employed there?

Debtor 1

☐ Employed

☒ Not employed

Debtor 2 or non-filing spouse

☐ Employed

☐ Not employed

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	\$ 0.00	\$ N/A
3. Estimate and list monthly overtime pay.	+\$ 0.00	+\$ N/A
4. Calculate gross income. Add line 2 + line 3.	\$ 0.00	\$ N/A

Debtor 1 **Gary E. Marchlewicz**

Case number (if known)

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	4. \$ 0.00	\$ N/A
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 0.00	\$ N/A
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ N/A
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ N/A
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ N/A
5e. Insurance	5e. \$ 0.00	\$ N/A
5f. Domestic support obligations	5f. \$ 0.00	\$ N/A
5g. Union dues	5g. \$ 0.00	\$ N/A
5h. Other deductions. Specify: _____	5h.+ \$ 0.00	+ \$ N/A
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ 0.00	\$ N/A
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 0.00	\$ N/A
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$ N/A
8b. Interest and dividends	8b. \$ 0.00	\$ N/A
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ N/A
8d. Unemployment compensation	8d. \$ 0.00	\$ N/A
8e. Social Security	8e. \$ 0.00	\$ N/A
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: <u>Link card</u>	8f. \$ 349.00	\$ N/A
8g. Pension or retirement income	8g. \$ 0.00	\$ N/A
8h. Other monthly income. Specify: <u>worker's compensation benefits</u>	8h.+ \$ 1,732.00	+ \$ N/A
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ 2,081.00	\$ N/A
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 2,081.00 + \$ N/A = \$ 2,081.00	
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: _____		11. +\$ 0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data</i> , if it applies		12. \$ 2,081.00 Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: _____		

Fill in this information to identify your case:

Debtor 1 Gary E. Marchlewicz

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number _____
(If known)

Check if this is:

☐ An amended filing
☐ A supplement showing post-petition chapter 13 expenses as of the following date:

MM / DD / YYYY

☐ A separate filing for Debtor 2 because Debtor 2 maintains a separate household

Official Form B 6J *** DEBTOR LIVES WITH RELATIVES ***

Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☒ No. Go to line 2.
☐ Yes. Does Debtor 2 live in a separate household?
☐ No
☐ Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents? ☐ No

Do not list Debtor 1 and Debtor 2.
Do not state the dependents' names.

☒ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

minor child

13 yrs

- ☐ No
☒ Yes
☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No
☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 6I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 400.00

If not included in line 4:

- 4a. Real estate taxes
4b. Property, homeowner's, or renter's insurance
4c. Home maintenance, repair, and upkeep expenses
4d. Homeowner's association or condominium dues

4a. \$ 0.00
4b. \$ 0.00
4c. \$ 0.00
4d. \$ 0.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 0.00

Debtor 1 **Gary E. Marchlewicz**

Case number (if known)

6. Utilities:

6a. Electricity, heat, natural gas	6a. \$	75.00
6b. Water, sewer, garbage collection	6b. \$	0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	175.00
6d. Other. Specify: _____	6d. \$	0.00

7. Food and housekeeping supplies

7. \$ 250.00

8. Childcare and children's education costs

8. \$ 50.00

9. Clothing, laundry, and dry cleaning

9. \$ 100.00

10. Personal care products and services

10. \$ 75.00

11. Medical and dental expenses

11. \$ 250.00

12. Transportation. Include gas, maintenance, bus or train fare.

Do not include car payments.

12. \$ 500.00

13. Entertainment, clubs, recreation, newspapers, magazines, and books

13. \$ 50.00

14. Charitable contributions and religious donations

14. \$ 0.00

15. Insurance.

Do not include insurance deducted from your pay or included in lines 4 or 20.

15a. Life insurance 15a. \$ 0.00

15b. Health insurance 15b. \$ 0.00

15c. Vehicle insurance 15c. \$ 90.00

15d. Other insurance. Specify: _____ 15d. \$ 0.00

16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.

Specify: _____

16. \$ 0.00

17. Installment or lease payments:

17a. Car payments for Vehicle 1 17a. \$ 0.00

17b. Car payments for Vehicle 2 17b. \$ 0.00

17c. Other. Specify: _____ 17c. \$ 0.00

17d. Other. Specify: _____ 17d. \$ 0.00

18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).

18. \$ 0.00

19. Other payments you make to support others who do not live with you.

\$ 0.00

Specify: _____

20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.

20a. Mortgages on other property 20a. \$ 0.00

20b. Real estate taxes 20b. \$ 0.00

20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00

20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00

20e. Homeowner's association or condominium dues 20e. \$ 0.00

21. Other: Specify: _____

21. +\$ 0.00

22. Your monthly expenses. Add lines 4 through 21.

The result is your monthly expenses.

22. \$ 2,015.00

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 2,081.00

23b. Copy your monthly expenses from line 22 above. 23b. -\$ 2,015.00

23c. Subtract your monthly expenses from your monthly income.

The result is your monthly net income.

23c. \$ 66.00

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Explain:

B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court
Northern District of Illinois

In re **Gary E. Marchlewicz**

Debtor(s)

Case No.
Chapter

7

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of **58** sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date **July 31, 2015**

Signature **/s/ Gary E. Marchlewicz**
Gary E. Marchlewicz
Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

United States Bankruptcy Court
Northern District of Illinois

In re **Gary E. Marchlewicz**

Debtor(s)

Case No.
Chapter

7

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

☐

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$10,611.00	2013 earnings
\$1,987.00	2014 earnings
\$2,158.00	2015 earnings

B7 (Official Form 7) (04/13)

2

2. Income other than from employment or operation of business

None

☐

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$1,179.00	2013 unemployment compensation
\$2,227.00	2014 unemployment compensation
\$9,652.00	2015 worker's compensation benefits
\$1,745.00	2015 Link Card

3. Payments to creditors

None

☒

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
---------------------------------	----------------------	-------------	-----------------------

None

☒

b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS/ TRANSFERS	AMOUNT PAID OR VALUE OF TRANSFERS	AMOUNT STILL OWING
------------------------------	------------------------------------	--	-----------------------

None

☒

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING
--	-----------------	-------------	-----------------------

4. Suits and administrative proceedings, executions, garnishments and attachments

None

☐

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
------------------------------------	-------------------------	---------------------------------	--------------------------

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B7 (Official Form 7) (04/13)

3

CAPTION OF SUIT
AND CASE NUMBER

**Fertility Centers of Illinois vs Marchlewicz
11 M1 142385**

NATURE OF
PROCEEDING

collection

COURT OR AGENCY
AND LOCATION

Cook County, IL

STATUS OR
DISPOSITION

judgment

None ☐ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE
BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF
PROPERTY

5. Repossessions, foreclosures and returns

None ☐ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF
CREDITOR OR SELLER

DATE OF REPOSSESSION,
FORECLOSURE SALE,
TRANSFER OR RETURN

DESCRIPTION AND VALUE OF
PROPERTY

6. Assignments and receiverships

None ☐ a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF
ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None ☐ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS
OF CUSTODIAN

NAME AND LOCATION
OF COURT
CASE TITLE & NUMBER

DATE OF
ORDER

DESCRIPTION AND VALUE OF
PROPERTY

7. Gifts

None ☐ List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF
PERSON OR ORGANIZATION

RELATIONSHIP TO
DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND
VALUE OF GIFT

8. Losses

None ☐ List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE
OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF
LOSS WAS COVERED IN WHOLE OR IN PART
BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

B7 (Official Form 7) (04/13)

4

9. Payments related to debt counseling or bankruptcy

None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Dennis L Leahy One Court Place Suite 203 Rockford, IL 61101	2015	\$1180
credit counseling	2015	

10. Other transfers

None ☒ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
---	------	---

None ☒ b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY
----------------------------------	---------------------------	---

11. Closed financial accounts

None ☒ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
---------------------------------	--	---------------------------------------

12. Safe deposit boxes

None ☒ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
---	---	----------------------------	--

13. Setoffs

None ☒ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

B7 (Official Form 7) (04/13)

5

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
------------------------------	----------------	------------------

14. Property held for another person

None ☒ List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
---------------------------	-----------------------------------	----------------------

15. Prior address of debtor

None ☐ If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
4924 Greewood Place, Rockford, IL 61108	Gary & Agnieszka (Angel/Agnes) Marchlewicz	

16. Spouses and Former Spouses

None ☒ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None ☒ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
-----------------------	---------------------------------------	----------------	-------------------

None ☒ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
-----------------------	---------------------------------------	----------------	-------------------

None ☒ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
---------------------------------------	---------------	-----------------------

B7 (Official Form 7) (04/13)

6

18 . Nature, location and name of business

None

☐

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

LAST FOUR DIGITS OF
SOCIAL-SECURITY OR
OTHER INDIVIDUAL
TAXPAYER-I.D. NO.

NAME

ADDRESS

NATURE OF BUSINESS

BEGINNING AND
ENDING DATES

**Gary
Marchlewicz/Home
Best Exteriors**

**Debtor operated a home
improvement business
which terminated in
2010**

None

☐

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

*(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)*

19. Books, records and financial statements

None

☐

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None

☐

b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

None

☐

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

ADDRESS

None

☐

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

B7 (Official Form 7) (04/13)

7

NAME AND ADDRESS

DATE ISSUED

20. Inventories

- None ☐ a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY
(Specify cost, market or other basis)

- None ☐ b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY
RECORDS

21. Current Partners, Officers, Directors and Shareholders

- None ☐ a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

- None ☐ b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE
OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

- None ☐ a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

ADDRESS

DATE OF WITHDRAWAL

- None ☐ b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

- None ☐ If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS
OF RECIPIENT,
RELATIONSHIP TO DEBTOR

DATE AND PURPOSE
OF WITHDRAWAL

AMOUNT OF MONEY
OR DESCRIPTION AND
VALUE OF PROPERTY

24. Tax Consolidation Group.

- None ☐ If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

B7 (Official Form 7) (04/13)

8

25. Pension Funds.

None ☐ If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * *

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date July 31, 2015

Signature /s/ Gary E. Marchlewicz
Gary E. Marchlewicz
Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

B8 (Form 8) (12/08)

**United States Bankruptcy Court
Northern District of Illinois**

In re **Gary E. Marchlewicz**

Debtor(s)

Case No.

Chapter

7

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A - Debts secured by property of the estate. (Part A must be fully completed for **EACH** debt which is secured by property of the estate. Attach additional pages if necessary.)

Property No. 1	
Creditor's Name: -NONE-	Describe Property Securing Debt:
Property will be (check one): <input type="checkbox"/> Surrendered <input type="checkbox"/> Retained	
If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is (check one): <input type="checkbox"/> Claimed as Exempt <input type="checkbox"/> Not claimed as exempt	

PART B - Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)

Property No. 1		
Lessor's Name: -NONE-	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date **July 31, 2015**

Signature **/s/ Gary E. Marchlewicz**

Gary E. Marchlewicz

Debtor

United States Bankruptcy Court
Northern District of Illinois

In re Gary E. Marchlewicz

Debtor(s)

Case No.

Chapter

7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
- | | | |
|---|----|-----------------|
| For legal services, I have agreed to accept | \$ | <u>1,182.00</u> |
| Prior to the filing of this statement I have received | \$ | <u>1,182.00</u> |
| Balance Due | \$ | <u>0.00</u> |
2. The source of the compensation paid to me was:
- ☒ Debtor ☐ Other (specify):
3. The source of compensation to be paid to me is:
- ☒ Debtor ☐ Other (specify):
4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
- ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - d. [Other provisions as needed]
- Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.**
6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:
- Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.**

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: July 31, 2015

/s/ Dennis L Leahy

Dennis L Leahy
Dennis L Leahy
One Court Place Suite 203
Rockford, IL 61101
815 964-9600 Fax: 815 964-9620
attyleahy@yahoo.com

DENNIS L. LEAHY
Attorney At Law
One Court Place Suite 203
Rockford, IL 61101
815/964-9600

CONTRACT FOR CHAPTER 7 BANKRUPTCY

This agreement is executed this 29th day of June, 2015.

Type of Bankruptcy:

Client retains Attorney Dennis L. Leahy to file a Chapter 7 bankruptcy.

Services Provided by Attorney:

Contingent upon being paid for the services as specified below, the attorney shall provide the following legal services for the client: Preparation and filing of Chapter 7 Petition in Bankruptcy.

Fees:

The base fee for the filing of the bankruptcy is \$1182⁰⁰, the filing fee \$335⁰⁰, and the credit report is \$33⁰⁰, for a total of \$1550⁰⁰, to be paid prior to filing. The amount of the filing fee may increase, as determined by Congress.

Additional costs required on a case by case basis include:

1. Mandatory prepetition credit counseling and post petition financial education.
2. Asset verification report (when required by attorney)

If the fees are not paid as stated above and as a result the amount of legal service to be provided by the attorney is increased, the fee shall be increased accordingly to compensate the Attorney for the additional time and expense in providing the legal services.

Terms of Payment:

1. The fees shall be paid in full prior to the filing of the bankruptcy.
2. Client has paid \$_____ as a retainer fee. This amount has been earned upon receipt by the attorney and is non-refundable.
3. No earned portion of any fee is refundable.

Services Not Provided Under the Base Fee:

Representation does not include defense of discharge or dischargeability proceedings, redemption proceedings, dismissal proceedings, reinstatement proceedings, judicial lien avoidances, post-petition amendments, relief from stay actions or other adversary proceedings or attendance at continued meeting of creditors, preparation of motion to approve reaffirmation agreement.

Compensation for Services Not Covered Under Base Fee:

1. Fees for additional services shall be paid at \$250.00 per hour plus costs (when applicable)
2. \$75.00 for preparation and filing of each amendment to the bankruptcy.
3. \$75.00 for preparation and filing of motion for court approval of reaffirmation agreement and attendance at hearing if required by the court.
4. \$500.00 plus filing fee for motion to reopen bankruptcy.

The client understands that if the client does not pay the fees as set forth above, the attorney has no obligation to provide the services.

Clients Obligations:

1. To pay the fees as set forth above.
2. To provide accurately, honestly and in a timely manner, all of the information including all documents necessary to prepare and file the bankruptcy.
3. To satisfy prepetition credit counseling and post-petition financial education requirements.
4. To keep the attorney advised of the clients address and telephone number.
5. To attend the 341 Meeting of Creditors and other hearings set in the case as advised by the attorney.
6. To provide any information requested of the client by the Bankruptcy Trustee, the U.S. Trustee, or any other party in interest, unless the court rules that the client is not required to provide the information.
7. To respond immediately to any request of the client by the attorney or the attorney's staff.
8. Attorney is authorized to disburse from his Client Trust Account, when applicable, funds for payment of filing fees, costs, attorney fees and refunds.

Client acknowledges receipt of a copy of this agreement.


Dennis L. Leahy


Client

Client

We are a debt relief agency. We help people file for bankruptcy relief under the Bankruptcy Code

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b)
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

B 201B (Form 201B) (12/09)

United States Bankruptcy Court
Northern District of Illinois

In re **Gary E. Marchlewicz**

Debtor(s)

Case No.

Chapter

7

CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)
UNDER § 342(b) OF THE BANKRUPTCY CODE

Certification of Debtor

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

Gary E. Marchlewicz

Printed Name(s) of Debtor(s)

X **/s/ Gary E. Marchlewicz**

Signature of Debtor

July 31, 2015

Date

Case No. (if known)

X

Signature of Joint Debtor (if any)

Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

**United States Bankruptcy Court
Northern District of Illinois**

In re **Gary E. Marchlewicz** Debtor(s) Case No. _____
Chapter **7**

VERIFICATION OF CREDITOR MATRIX

Number of Creditors: **212**

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: **July 31, 2015**

/s/ Gary E. Marchlewicz
Gary E. Marchlewicz
Signature of Debtor

21st Century Insurance
P.O. Box 15510
Wilmington, DE 19886-9252

Advanced Disposal
8538 Hwy 251 S
Davis Junction, IL 61020

Agnieszka (Angel) Marchlewicz Bacik
6231 S. Moody
Chicago, IL 60638

All Kids and Family Care
P.O. Box 19121
Springfield, IL 62794-9121

Amcore/BMO Harris Bank
501-7th Street
Rockford, IL 61104

Associated Bank
Corporate Security
MS 7027
P.O. Box 19097
Green Bay, WI 54307-9097

AT&T
Enhanced Recovery Corp
Attn: Client Services
8014 Bayberry Rd
Jacksonville, FL 32256

AT&T
P.O. Box 769
Arlington, TX 76004

AT&T Midwest
Jefferson Capital Systems LLC
16 McLeland Rd
Saint Cloud, MN 56303

AT&T Midwest / Jefferson Capital Systems
First National Collection Bureau
610 Waltham Way
Sparks, NV 89434

Blackhawk State Bank
400 Broad Street
Beloit, WI 53512-9950

Blackhawk State Bank
Transworld Systems Inc.
9525 Sweet Valley Dr.
Cleveland, OH 44125

BSI Financial Services
PO Box 517
314 S. Franklin St.
Titusville, PA 16354

California Casualty
P.O. Box 39700
Colorado Springs, CO 80949-9700

California Casualty
Joseph Mann & Creed
8948 Canyon Falls Blvd #200
Twinsburg, OH 44087

CBO CV
CB Accts
124 SW Adams St #215
Peoria, IL 61602

CCRT Properties
Falls Collection Svc
PO Box 668
Germantown, WI 53022

Centegra Health System
13707 W. Jackson St.
Woodstock, IL 60098

Chase Bank / JP Morgan Chase Bank
OH1-1272
340 S. Cleveland Ave #370
Westerville, OH 43081

Citi Cards
Citicorp Credit Svices
Attn: Centralized Bankruptcy
PO Box 20507
Kansas City, MO 64195

Citi Cards
Citicorp Credit Svices
Attn: Centralized Bankruptcy
Box 6000
The Lakes, NV 89163-6000

Citibank South Dakota NA
Unifund
10625 Techwoods Circle
Cincinnati, OH 45242

Citibank South Dakota NA
Palisades Collection LLC
Blitt and Gaines, PC
661 W Glenn Avenue
Wheeling, IL 60090

Citizens Fin
Attn:Bankruptcy
6457 N 2nd St
Loves Park, IL 61111

City of Madison Ambulance Conv
Credit Management Cont
PO Box 1654
Green Bay, WI 54305

City of Rockford Parking
Rockford Mercantile
2502 S Alpine Rd
Rockford, IL 61108

City of Rockford Parking
ABM
211B Elm Street
Rockford, IL 61101

Comcast
Stellar Recovery Inc.
4500 Salisbury Rd #105
Jacksonville, FL 32216-8035

Comcast
Southwest Credit System
4120 International Parkway #100
Carrollton, TX 75007

Comcast
4450 Kishwaukee St.
Rockford, IL 61109

Commonwealth Edison
TCS Inc. / Torres Credit
PO Box 189
Carlisle, PA 17013-0189

Commonwealth Edison
CBE Group
1309 Technology Pkwy
Cedar Falls, IA 50613

Commonwealth Edison
Attn: Bankruptcy Group
3 Lincoln Center
Oakbrook Terrace, IL 60181

Commonwealth Edison
Credit Collection Services
Two Wells Ave, Dept 9136
Newton Center, MA 02459

Commonwealth Edison
LJ Ross Associates
P.O. Box 6099
Jackson, MI 49204-6099

Commonwealth Edison
Contract Callers Inc.
501 Greene St., 3rd Floor #302
Augusta, GA 30901

Credit Control
9428 Baymeadows Rd #260
Jacksonville, FL 32256

Creditor's Protection Service
308 W. State St. #485
Rockford, IL 61101

Crusader Clinic
1200 W. State St.
Rockford, IL 61102

Crusader Clinic
Rockford Mercantile Agency
2502 S. Alpine Rd
Rockford, IL 61108

Diamond Headache Clinic
2742 Momentum Place
Chicago, IL 60689-0001

Diamond Headache Clinic
Transworld Systems Inc.
9525 Sweet Valley Dr
Cleveland, OH 44125

Diamond Headache Clinic
Law Office of Joel Cardis
2006 Swede Rd #100
E. Norriton, PA 19401

Diamond Headache Clinic
NCO Financial Systems
507 Prudential Rd
Horsham, PA 19044

Discover Bank
Blitt and Gaines PC
661 Glenn Ave
Wheeling, IL 60090

Discover Card
P.O. Box 30395
Salt Lake City, UT 84130-0395

Discover Card
AMO Recoveries
25221 Country Club Blvd #200
North Olmsted, OH 44070

Discover Card
Discover Financial Services
TSYS Total Debt Management
P.O. Box 6700
Norcross, GA 30091-6700

Discover Card
Encore Receivable Management
400 N Rogers Rd
P.O. Box 3330
Olathe, KS 66063-3330

Discover Card
2500 Lake Cook Rd
Deerfield, IL 60015

DreamBuilder Investments LLC
BP Law Group
8815 Research Dr.
Irvine, CA 92618

DTA Solutions LLC
PO Box 202166
Dallas, TX 75320-2166

Erie Insurance
100 Erie Ins. Place
Erie, PA 16530

Erie Insurance
Receivable Management Services
77 Hartland St. #401
P.O. Box 280431
East Hartford, CT 06128-0431

Erie Insurance
Brennan & Clark
721 E. Madison #200
Villa Park, IL 60181

Fertility Centers of Illinois
Certified Services Inc
1733 Washington St. #2
Waukegan, IL 60085

Fertility Centers of Illinois
3703 West Lake Ave #310
Glenview, IL 60026-1266

Fertility Centers of Illinois
Certified Services Inc
Attorney David J. Axelrod & Assoc
1448 Old Skokie Rd
Highland Park, IL 60035

Fifth Third Bank
Attn: Legal Rep Notice
1830 E Paris Ave
Grand Rapids, MI 49546

Fifth Third Bank
Allied Interstate
P.O. Box 4000
Warrenton, VA 20188

Fifth Third Bank
Allied Interstate
P.O. Box 4000
Warrenton, VA 20188

Fifth Third Bank / Diverse Funding Assoc
CAB Asset Management
PO Box 20298
Towson, MD 21284-0298

Fifth Third Bank / Diverse Funding Assoc
Apelles
3700 Corporate Drive #240
Columbus, OH 43231

Fifth Third Bank / Diverse Funding Assoc
Halsted Financial Services
P.O. Box 828
Skokie, IL 60076

First Capital LLC as assignee of
Hudson & Keyse LLC /National City Bank
The Shindler Law Firm
1990 E. Algonquin Rd #180
Schaumburg, IL 60173

First Energy Solutions
341 White Pond Drive #B2
Akron, OH 44320

First Energy Solutions
Receivable Management Services
4836 Brecksville Rd
P.O. Box 523
Richfield, OH 44286

First Franklin Loan Services
150 Allegheny Center Mall
Locator # 24-040
Pittsburgh, PA 15212

FV-I Inc. in Trust for
Morgan Stanley Mortgage Capital Holdings
c/o Pierce & Assoc.
1 North Dearborn
Chicago, IL 60602

Geico Casualty Co
One Geico Center
Macon, GA 31296-0001

Geico Casualty Co
Credit Collection Services
Two Wells Ave
Newton Center, MA 02459

Healthsource Rockford East
7445 E State St.
Rockford, IL 61108

Hillcrest Animal Hospital
227 N Alpine Rd
Rockford, IL 61107

Hillcrest Animal Hospital
Rockford Mercantile Agency
2502 S Alpine Rd
Rockford, IL 61108

Home Depot Credit Services
PO Box 689100
Des Moines, IA 50368

Home Depot Credit Services
Riverwalk Holdings Ltd
Praxis Financial Solutions
7331 N. Lincoln Ave #8
Lincolnwood, IL 60712-1704

Home Depot Credit Services
Riverwalk Holdings Ltd
Northland Group
P.O. Box 390846
Minneapolis, MN 55439

Home Depot Credit Services
CitiCorp Credit Services
Centralized Bankruptcy
PO Box 20507
Kansas City, MO 64195

Home Depot Credit Services / Citibank
Riverwalk Holdings Ltd
Second Round, LP
P.O. Box 41955
Austin, TX 78704-1955

Home Depot Credit Services / Citibank
Riverwalk Holdings Ltd
Vision Financial Group
P.O. Box 900
Purchase, NY 10577-0900

Home Depot Credit Services / Citibank
Riverwalk Holdings Ltd
Velocity Investments
P.O. Box 788
Wall, NJ 07719

Home Depot Credit Services / Citibank
Riverwalk Holdings Ltd
Velocity Investments/Capital Mgmt Serv
698-1/2 S Ogden St.
Buffalo, NY 14206-2317

Hudson & Keyse LLC as assignee of
National City Bank
Law Office of Keith S. Shindler
1040 S Milwaukee Ave
Wheeling, IL 60090

Hudson & Keyse LLC as assignee of
National City Bank
382 Blackbrook Rd
Painesville, OH 44077

Ignacio U Omengan, MD
Mutual Management
7177 Crimson Ridge Dr. #10
Rockford, IL 61107

Ignacio U Omengan, MD
Attorney Terry Hoss
P.O. Box 449
Cherry Valley, IL 61016

Illinois Department of Revenue
Bankruptcy Section
P.O. Box 64338
Chicago, IL 60664

Illinois Department of Revenue
Linebarger Goggan Blair & Sampson LLP
PO Box 06140
Chicago, IL 60606-0140

Illinois Department of Revenue
Harvard Collection Services
4839 N Elston Avenue
Chicago, IL 60630-2534

Illinois Dept of Employment Security
Benefit Payment Control
PO Box 4385
Chicago, IL 60680-4385

Illinois Pathologist Services
P.O. Box 9846
Peoria, IL 61612

Illinois Tollway
Violation Administration Center
2700 Ogden Ave
Downers Grove, IL 60515-1703

Illinois Tollway
Thomas Planera & Assoc
4440 Lincoln Hwy #301
Matteson, IL 60443

Illinois Tollway
Law Office of Keith S. Shindler
1990 E Algonquin Rd
Schaumburg, IL 60173

Illinois Tollway
NCO Financial Systems
600 Holiday Plaza Dr. #300
Matteson, IL 60443

Illinois Tollway
Arnold Scott Harris
111 W. Jackson Blvd #600
Chicago, IL 60604-4135

JP Morgan Chase & Co.
Attn: Legal Paper Serv Dept, 18th Floor
4 Chase Metrotech
Brooklyn, NY 11425

JP Morgan Chase & Co.
American Coradius International
2420 Sweet Home Rd #150
Amherst, NY 14228-2244

JP Morgan Chase Bank
West Asset Management
2703 N Hwy 75
Sherman, TX 75090

JP Morgan Chase Bank
First Source Advantage
205 Bryant Woods South
Amherst, NY 14228

JP Morgan Chase Bank
Integrity Solution Services
P.O. Box 7230
Overland Park, KS 66207-0230

JP Morgan Chase Bank
United Recovery Systems
5800 North Course Drive
Houston, TX 77072

JP Morgan Chase Bank
Convergent Outsourcing
800 SW 39th St.
P.O. Box 9004
Renton, WA 98057

Land Home Financial Services
PO Box 5010
Concord, CA 94524

Land Home Financial Services
PO Box 25164
Santa Ana, CA 92799-5164

Land Home Financial Services
2042 Wooddale Dr. #160
Woodbury, MN 55125

Liberty Mutual
7029 Rote Rd #105
Rockford, IL 61107

Liberty Mutual
477 S. 3rd St. #148
Geneva, IL 60134

Liberty Mutual
Credit Collection Services
Two Wells Ave
Newton Center, MA 02459

Life Watch
2731 Paysphere Cir
Chicago, IL 60674-0027

Liturgical Publications
P.O. Box 510817
New Berlin, WI 53151-0817

Liturgical Publications
2875 S James Dr.
New Berlin, WI 53151

McHenry Co Court Clerk
Alliance One Receivables Management
PO Box 2449
Gig Harbor, WA 98335-2449

McHenry County Circuit Court
Arnold Scott Harris
Attorneys at Law
111 W. Jackson Blvd #600
Chicago, IL 60604-4134

Miller Eye Center
2995 Eastrock Drive
Rockford, IL 61109

Miller Eye Center
Tri State Adjustments Freeport
440 E Challenge St.
Freeport, IL 61032

Mutual Management
Attorney D Richard Haime
6500 N Second St.
Loves Park, IL 61111

Mutual Management
7177 Crimson Ridge Dr. #10
Rockford, IL 61107

National City
P.O. Box 856176
Louisville, KY 40285-6176

National City/PNC Bank
Attn: Bankruptcy Dept
PO Box 489909
Charlotte, NC 28269-5329

Neurologic & Orthopedic Institute of Chi
Friedman & Wexler
500 W Madison St #2910
Chicago, IL 60661-2587

Nicor Gas
Attn: Bankruptcy Dept
1844 Ferry Rd
Naperville, IL 60563

Nicor Gas
P.O. Box 190
Aurora, IL 60507

Nicor Gas
NCO Financial Systems
507 Prudential Road
Horsham, PA 19044

OSF Medical Group
P.O. Box 91011
Chicago, IL 60680-8807

OSF Medical Group
OSF Healthcare
P.O. Box 1806
Peoria, IL 61656-1806

OSF Medical Group
Convergent Healthcare recoveries
124 SW Adams St. #215
Peoria, IL 61602

OSF Saint Anthony Medical Center
PO Box 5065
Rockford, IL 61125

OSF St Anthony Medical Center
Rockford Mercantile
2502 S Alpine Rd
Rockford, IL 61108

OSF St Anthony Medical Center
5666 E. State St.
Rockford, IL 61108

Palisades Collection LLC
Unifund CCR Partners
10625 Techwoods Circle
Cincinnati, OH 45242

Paypal, Inc.
Convergent Outsourcing
800 SW 39th St.
P.O. Box 9004
Renton, WA 98057

Paypal, Inc.
American Coradius International
2420 Sweet Home Rd #150
Amherst, NY 14228-2244

Paypal, Inc.
IC System
444 Hwy 96 East
PO Box 64378
Saint Paul, MN 55164-0378

Paypal, Inc.
IC System
444 Hwy 96 East
PO Box 64378
Saint Paul, MN 55164-0378

Paypal, Inc.
2211 N. 1st St.
San Jose, CA 95131

Perry Tuneberg DDS
Rockford Mercantile
2502 S Alpine Rd
Rockford, IL 61108

Perry Tuneberg DDS
4040 Morsay Drive
Rockford, IL 61107

Physicians Immediate Care
P.O Box 2176, Dept 5389
Milwaukee, WI 53201-2176

Physicians Immediate Care
Creditor's Protection Service
P.O. Box 4115
Rockford, IL 61110

Radiology Consultants of Rockford
39020 Eagle Way
Chicago, IL 60678-1390

Radiology Consultants of Rockford
ATG Credit
PO Box 14895
Chicago, IL 60614-4895

RH Donnelley / DEX
Attn: Customer Care
1615 Bluff City Hwy
Bristol, TN 37620

RH Donnelley / DEX
JSD Management/James Stevens & Daniels
1283 College Park Drive
Dover, DE 19904

RH Donnelley / DEX
PO Box 619009
DFW Airport, TX 75261-9009

Rock River Water Reclamation
United Credit Service
PO Box 740
Elkhorn, WI 53121

Rock River Water Reclamation
3501 Kishwaukee St.
Rockford, IL 61109

Rock River Water Reclamation
United Credit Serv.
15 N. Lincoln St.
P.O. Box 740
Elkhorn, WI 53121-0740

Rockford Associated Clinical Pathologist
PO Box 8768
Rockford, IL 61126-8768

Rockford Cardiovascular
Acct Rcv Svc
5183 Harlem Rd
Loves Park, IL 61111

Rockford Cardiovascular
PO Box 6003
Rockford, IL 61126-6003

Rockford Gastroenterology
401 Roxbury Rd
Rockford, IL 61107

Rockford Gastroenterology
Account Recovery Services
PO Box 2526
Loves Park, IL 61132

Rockford Health Physicians
Creditors Protection Serv
308 W State St. #485
Rockford, IL 61101

Rockford Health Physicians
Pellettieri
991 Oak Creek Dr
Lombard, IL 60148

Rockford Health Physicians
2300 N Rockton Avenue
Rockford, IL 61103

Rockford Health Physicians
MiraMed Revenue Group
Dept 77304
PO Box 77000
Detroit, MI 48277-0304

Rockford Health System/RMH
Rockford Mercantile
2502 S Alpine Rd
Rockford, IL 61108

Rockford Health System/RMH
2400 N Rockton Avenue
Rockford, IL 61103

Rockford Mercantile Agency
2502 S Alpine Rd
Rockford, IL 61108

Rockford Orthopedic Associates
PO Box 5247
Rockford, IL 61125-0247

Rockford Orthopedic Associates
Creditors Protection Service
308 W State St. #485
Rockford, IL 61101

Rockford Radiology
PO Box 5368
Rockford, IL 61125-0368

Rockford Radiology
Rockford Mercantile Agency
2502 S Alpine Rd
Rockford, IL 61108

Rockford Radiology
PO Box 1790
Brookfield, WI 53008-1790

Rockford Register Star
99 E. State St.
Rockford, IL 61104

Saxon
PO Box 161489
Fort Worth, TX 76161-1489

Select Portfolio Servicing
PO Box 65250
Salt Lake City, UT 84165-0250

SMHC of Wisconsin St Marys
PSKN&OBRWTR
404 Glenway St
Madison, WI 53701

Specialized Loan Servi
Attn: Bankruptcy
8742 Lucent Blvd. Suite 300
Highlands Ranch, CO 80129

Sprint
ER Solutions/Convergent Outsourcing
PO Box 9004
Renton, WA 98057

Sprint
Customer Service
PO Box 8077
London, KY 40742

Sprint
Convergent Outsourcing Inc.
10750 Hammerly Blvd #200
Houston, TX 77043

Sprint Correspondence
Attn: Bankruptcy Dept
PO Box 7949
Overland Park, KS 66207-0949

Swedish American Health System
Creditors Protection Serv
PO Box 4115
Rockford, IL 61101

Swedish American Hospital
R&B Receivables Management
860 S Northpoint Blvd
Waukegan, IL 60085

Swedish American Hospital
NCC / Commonwealth Finance
245 Main St.
Scranton, PA 18519

Swedish American Hospital
1401 E State St.
Rockford, IL 61104

Swedish American Hospital
Attorney Dennis A. Brebner & Assoc
860 Northpoint Blvd
Waukegan, IL 60085-8211

Swedish American Hospital
Creditors Protection Service
308 W State St. #485
Rockford, IL 61101

T Mobile
P.O. Box 37380
Albuquerque, NM 87176-7380

T Mobile
Midland Credit Management
8875 Aero Drive #200
San Diego, CA 92123

T Mobile Bankruptcy Team
P.O. Box 7949
Overland Park, KS 66207-0949

Tiger Direct
Simplexity
P.O. Box 25084
Lehigh Valley, PA 18002

Tiger Direct
7795 W. Flagler St. #35
Miami, FL 33144

Tiger Direct / Simplexity
NCO Financial Systems
507 Prudential Rd
Horsham, PA 19044

Tower Hobbies
Pro Com Services
Attn: Bankruptcy
PO Box 202
Springfield, IL 62705

Tower Hobbies
P.O. Box 9078
Champaign, IL 61826-9078

Tower Hobbies
Business Service Bureau
P.O. Box 771
Champaign, IL 61824

UPS
P.O. Box 7247-0244
Philadelphia, PA 19170-0001

UPS
4836 Brecksville Rd
PO Box 539
Richfield, OH 44286-9619

UPS
Receivable Management Services
PO Box 523
Richfield, OH 44286

US Bank
Bankruptcy Dept
PO Box 5227
CN-OH-W15
Cincinnati, OH 45202-5227

US Bank / Albion Credit Services
Varadi Hair & Checki
650 Poydras St. #1535
New Orleans, LA 70130

US Dept of Education
Great Lakes Educational Loan Services
P.O. Box 530229
Atlanta, GA 30353-0229

UW Health Physicians
University of Wisc Medical Foundation
7974 UW Health Court
Middleton, WI 53562-5531

Veolia Environmental Services
8538 Hwy 251 South
Davis Junction, IL 61020

Verizon Wireless
Pinnacle Credit Service
Attn: Bankruptcy
PO Box 640
Hopkins, MN 55343

Verizon Wireless
5175 Emerald Pkwy
Dublin, OH 43017

Verizon Wireless
VantageSourcing
P.O. Box 6786
Dothan, AL 36302

Verizon Wireless
Receivables Performance Management
20816-44th Ave W
Lynnwood, WA 98036

Verizon Wireless
United Collection Bureau
5620 Southwyck Blvd #206
Toledo, OH 43614

Verizon Wireless
Enhanced Recovery Company
8014 Bayberry Rd
Jacksonville, FL 32256-7412

Verizon Wireless
First National Collection Bureau
610 Waltham Way
Sparks, NV 89434

Verizon Wireless
Bankruptcy Administration
500 Technology Dr. #550
Weldon Springs, MO 63304

Village of Algonquin
ACS
2200 Harnish Dr
Algonquin, IL 60102

Wilmington Trust NA as Trustee under
Greenwich Investors XL Pass-Through
Trust Agreement dated March 1, 2012
559 San Ysidro Rd #1
Santa Barbara, CA 93108

Wilmington Trust NA, etc
Land Home Financial Serv
2042 Woodale Dr. #160
Woodbury, MN 55125

Wilmington Trust NA, etc
Land Home Financial Ser/Dreambuilder Inv
c/o BP Law Group
8815 Research Dr.
Irvine, CA 92618

Wilmington Trust NA, etc
Land Home Financial Serv
3330 Harbor Blvd, 3rd Floor
Costa Mesa, CA 92626

Yellow Book
HIBU
6300 C Street SW
Cedar Rapids, IA 52404

Yellow Book
Clovis & Roche
PO Box 1164
Metairie, LA 70004